



SHEET 1 OF 1

***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 A

Appendix 5: Drug names designated number (optional). It is present to be placed a check mark here if English language translation is available.